



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09855762

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   |                 |                               | 6                            | (Column 2) SMALI   |     |                     | ENTITY OR              |    | OTHER THAN<br>SMALL ENTITY |                        |
|---|--|---|-----------------|-------------------------------|------------------------------|--------------------|-----|---------------------|------------------------|----|----------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 14              |                               |                              |                    | Γ   | RATE                | FEE                    |    | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED    |                               | NUMB                         | ER EXTRA           | E   | BASIC FEE           | 355.00                 | OR | BASIC FEE                  | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | / 4 _ minus 20= |                               | • _                          |                    |     | X\$ 9=              |                        | OR | X\$18=                     | ^                      |
| INDEPENDENT CLAIMS  |  |   | 7 minus 3 =     |                               | * 4                          |                    |     | X40=                | 160                    | OR | X80=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                 |                               |                              | ·                  |     | +135=               | <br>زرالا              | OR | +270=                      |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |                 |                               | r "0" in c                   | olumn 2            | L   | TOTAL               | 515                    | OR | TOTAL                      |                        |
| CLAIMS AS AMENDED - PAR   |  |   |                 |                               | TII                          |                    |     | ı                   |                        |    | OTHER                      | THAN                   |
|   | gradi — granjanina somma grangga ga menganangana ningg | (Column 1)                                |                 | (Colu                         |                              | (Column 3) SMALL E |     |                     | NTITY                  | OR | SMALL                      | 100                    |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVIO<br>PAID | BER                          | PRESENT<br>EXTRA   |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus           | **                            |                              | =                  |     | X\$ 9=              |                        | OR | X\$18=                     |                        |
|   | Independent  | *   | Minus           | ***                           |                              | =                  | ľ   | X40=                |                        | OR | X80=                       |                        |
| L   | FIRST PRESE  | NTATION OF MI                             | JLTIPLE DEF     | PENDEN                        | T CLAIM                      |                    | Ī   | +135=               |                        | OR | +270=                      |                        |
|   |  |   |                 |                               |                              |                    | L   | TOTAL<br>ADDIT. FEE |                        | ΩD | TOTAL                      |                        |
|   | (Column 1) (Column 2) (Column 3)                       |   |                 |                               |                              |                    |     |                     | ·                      | ,  | ADDIT. FEE                 |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVI          | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA   |     | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | .34                                       | Minus           | ** 6                          | 10                           | = 14               |     | X\$ 9=              |                        | OR | X\$18=                     |                        |
|   | Independent  | NTATION OF MI                             | Minus           | ***                           | 7<br>T CLAIM                 | = 3<br>            |     | X40= (              | 200                    | OR | X80=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                 |                               |                              |                    | ۱ ا | +135=               | 4                      | OR | +270=                      |                        |
|   |  |   |                 |                               |                              |                    |     | TOTAL<br>DDIT. FEE  |                        | OR | TOTAL<br>ADDIT. FEE        |                        |
|   |  | (Column 1)                                |                 |                               | mn 2)                        | (Column 3)         |     |                     |                        |    |                            |                        |
| AMENDMENT C   | - %  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUM<br>PREVI                  | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA   |     | RATE                | ADDI-<br>TIONAL<br>FEE | :  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus           | **                            |                              | =                  |     | X\$ 9=              |                        | OR | X\$18=                     |                        |
|   | Independent  | *   | Minus           | ***                           |                              | =                  |     | X40=                |                        | OR | X80=                       |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT               |   |                 |                               |                              |                    | ╽┟  |                     |                        |    |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                 |                               |                              |                    |     |                     |                        | OR | +270=                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  OR ADDIT. FEE  TOTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number (ound in the appropriate box in column 1. |  |   |                 |                               |                              |                    |     |                     |                        |    |                            |                        |